

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Handwritten initials]</i>		<i>08/29/01</i>
FEE DETERMINATION			<i>8-31-01</i>
O.I.P.E. CLASSIFIER		<i>1019</i>	<i>09-28-01</i>
FORMALITY REVIEW	<i>[Handwritten initials]</i>		
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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